LE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000057828 (1)

PRECISE ENTERPRISES, INC.

Principal Place of Business Mailing Address 2948 WASHINGTON BLVD P.O BOX 740 ONECO FL 34204 SARASOTA FL 34234 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/18/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 65-0680486 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Ζiρ Country Country Zip 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes Yes ☐ No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GHAFFARI-NIKOU. NASSER 2948 WASHINGTON BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34234 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of nigistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition President TITLE 1.1 TITLE Pre Cime Ent. .. C. (NASSER GHADEAN NAME GHAFFARI-NIKOU, NASSER_ 1.2 NAME 48 N. WASHINETON Blod. **1815 619T AVENUE EA**ST, #85 STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETÉ Change ■ Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed for on an attachment with an address.

6.4 CITY-ST-ZIP